PTO/SB/17 (12-04)
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**Effective on 12/08/2004.**
**Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**

# FEE TRANSMITTAL
## For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

| Complete if Known | |
|---|---|
| Application Number | 09/802,509 |
| Filing Date | 3/9/2001 |
| First Named Inventor | Victor Keith Blanco |
| Examiner Name | JOHN M HOTALING |
| Art Unit | 3714 |
| Attorney Docket No. | MS1 -762US |

**TOTAL AMOUNT OF PAYMENT** ($) 1,360.00

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## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☑ Deposit Account   Deposit Account Number: 12-0769   Deposit Account Name: Lee & Hayes, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☑ Charge fee(s) indicated below    ☐ Charge fee(s) indicated below, **except for the filing fee**

☑ Charge any additional fee(s) or underpayments of fee(s)    ☑ Credit any overpayments
under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
|---|---|---|---|---|---|---|---|
| Application Type | Fee ($) | Small Entity Fee ($) | Fee ($) | Small Entity Fee ($) | Fee ($) | Small Entity Fee ($) | Fees Paid ($) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | _____ |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _____ |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | _____ |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | _____ |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _____ |

### 2. EXCESS CLAIM FEES

| Fee Description | | | | | | Fee ($) | Small Entity Fee ($) |
|---|---|---|---|---|---|---|---|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | | | | | | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | | | | | | 200 | 100 |
| Multiple dependent claims | | | | | | 360 | 180 |

| Total Claims | Extra Claims | Fee ($) | Fee Paid ($) | Multiple Dependent Claims | |
|---|---|---|---|---|---|
| | | | | Fee ($) | Fee Paid ($) |
| _____ - 20 or HP = _____ x | | 50 = | | _____ | _____ |

HP = highest number of total claims paid for, if greater than 20

| Indep. Claims | Extra Claims | Fee ($) | Fee Paid ($) |
|---|---|---|---|
| _____ - 3 or HP = _____ x | | 200 = | |

HP = highest number of independent claims paid for, if greater than 3

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee ($) | Fee Paid ($) |
|---|---|---|---|---|
| _____ - 100 = _____ | / 50 = _____ | (round up to a whole number) x | _____ | = _____ |

### 4. OTHER FEE(S)

Non-English Specification,   $130 fee (no small entity discount)

Other: RCE $790; 3 Mo Ext Fee($1020) minus 2 Mo Ext Fee PAID($450)=$570

Fees Paid ($) 1,360.00

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## SUBMITTED BY

| Signature | _Steven R. Sponseller (signature)_ | Registration No. (Attorney/Agent) 39384 | Telephone (509) 324-9256 |
|---|---|---|---|
| Name (Print/Type) Steven R. Sponseller | | | Date January 6, 2006 |